# 410000050074

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(========,
Continued Consider Continued Continu
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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DIVISION SPECIAL PORATION

T. HAMPTON

MAY 1 1 2010

EXAMINER

W10-46588

# **COVER LETTER**

TO: Registration Division of C				
SUBJECT: Florida F	Retail Specialists, LLC			
	(Name of Resulting	Florida Limited	Company)	)
	usiness Entity" into a '			and fees are submitted to ity Company" in
Please return all corr	respondence concernin	g this matter to	<b>)</b> :	
Robert A. Kaplus				
	(Contact Person)			
	(Firm/Company)			
2345 West Sand Lake R	oad, Suite 100			
	(Address)			
Orlando, Florida 32809				
(	City, State and Zip Code)			
bobby@realpropertyspec				
E-mail Address: (to b	e used for future annual re	port notifications	)	
For further informati	on concerning this ma	tter, please cal	l:	
Keith C. Durkin		_at ( <u>407</u>	) 839-4	289
(Name of Conta	act Person)	(Area Co	de and Da	sytime Telephone Number)
Enclosed is a check	for the following amou	ınt:		
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	\$180.00 Fili and Certified C		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 323	ions er Circle	Regis Divis P. O.	stration S sion of C Box 632	Corporations



BANK OF AMERICA CENTER
390 NORTH ORANGE AVENUE
SUITE 1400
ORLANDO, FL 32801
TELEPHONE: 407.43.39.4200
FACSIMILE: 407.425.8377
WWW.BROADANDCASSEL.COM

KEITH DURKIN DIRECT LINE: 407 839 4289 DIRECT FACSIMILE: 407 246 5614 EMAIL: KDURKIN@BROADANDCASSEL.COM

May 5, 2010

# PERSONAL AND CONFIDENTIAL

#### VIA U.S. MAIL

Ms. Tammy Hampton Regulatory Specialist II Registration/Qualification Section Department of Corporations Corporate Filings PO Box 6327 Tallahassee, Florida 32314

Re: Conversion of Florida Retail Specialists, LLC / Ref. Num. W10000016588

Dear Ms. Hampton:

I hope this letter finds you doing well. Please find enclosed the requested corrected documents for the conversion of Florida Retails Specialists from a corporation to a limited liability company.

If you have any questions or comments, please do not hesitate to contact me. Best regards.

Sincerely,

**BROAD AND CASSEL** 

Keith Durkin

kcd Enclosures



### FLORIDA DEPARTMENT OF STATE Division of Corporations

#### RECEIVED

10 MAY 10 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

April 5, 2010

ROBERT A KAPLUS 2345 W SAND LAKE RD STE 100 ORLANDO, FL 32809

SUBJECT: FLORIDA RETAIL SPECIALISTS, LLC

Ref. Number: W10000016588

We have received your document for FLORIDA RETAIL SPECIALISTS, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 010A00008269

#### **Certificate of Conversion**

For

#### "Other Business Entity"

Into

#### Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

	(Enter Name of Other Business Entity)
2. The "Other Busi	iness Entity" is a corporation
(Enter	entity type. Example: corporation, limited partnership, eral partnership, common law or business trust, etc.)
first organized, form	ned or incorporated under the laws of Florida
	er state, or if a non-U.S. entity, the name of the country)
on <u>01/08/1999</u>	
	her Business Entity" was first organized, formed or incorporat
-	n of the "Other Business Entity" was changed, the state or country rhich it is now organized, formed or incorporated:
under the laws of w	3
Florida	
Florida	Florida Limited Liability Company as set forth in the attached
Florida 4. The name of the	Florida Limited Liability Company as set forth in the attached zation:

SECKETASY FOR TAILE SECKETASY FOR TAILE

effective date listed in the attached Articles of Organization, if an effective date is

listed therein.)

·	
Signed this 4th day of March 20 10 .	
Signature of Member or Authorized Representative of Limited Liability Com	ipany:
Signature of Member or Authorized Representative:  Printed Name: Robert A. Kaplus  Title: Authorized Representative	
Signature(s) on behalf of Other Business Entity:  See below for required signature	ire(s).]
Signature: Zin.	
Printed Name: Rober A. Kablus Title: Director	
MUI $A$ $A$	
Signature:  Printed Name: Alan C. Charron  Title: Director	
Signature:	<del></del>
Printed Name: Title:	
Signature:	
Printed Name: Title:	
Signature: Title:	
rimed Name.	
Signature:	
Printed Name: Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.	
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.	
All others: Signature of an authorized person.	
Fees:	
	bw Di

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na	me:	
The name of the L	imited Liability C	ompany is:
Florida Retail Spec	ialists, LLC	
(Must end with the word "LLC.")	ls "Limited Liability Cor	mpany," the abbreviation "L.L.C.," or the designation
ARTICLE 11 - A	ddress:	
The mailing addre	ss and street addre	ess of the principal office of the Limited
Liability Company	y is:	
Principal Office	Address:	Mailing Address:
2345 West Sand Lake	Road, Suite 100	
Orlando, Florida 3280	)9	
ADTICLE III. B	Dogistored Agent	Registered Office, & Registered Agent's
Signature:	tegistereu Agent,	Registered Office, & Registered Agent's
	Company cannot serve as	its own Registered Agent. You must designate an
individual or another	active Florida registration	-
The name and the	Florida street addı	ress of the registered agent are:
	Alan C. Charron	
		Name
	2345 West Sand Lal	ke Road
	Florida street ad	dress (P.O. Box <u>NOT</u> acceptable)
	Orlando	FL 32809

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Charler 608, F.S.

Registered Agent's Signature (REQUIRED)

City, State, and Zip

(CONTINUED)
Page 1 of 2

10 Moy 10 AH se La

# ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Alan C. Charron	
	6700 Conroy Road, Suite 230	
	Orlando, Florida 32835	
MGR	Robert A. Kaplus	
	6700 Conroy Road, Suite 230	
	Orlando, Florida 32835	
	(Use attachment if necessary)	•
effective date: 1) cannot be prior to nent is filed by the Florida Departme	(Use attachment if necessary)  the date of filing:  (OPTIONAL)  nor more than 90 days after the date this ent of State; AND 2) must be the same as Certificate of Conversion, if an effective	S
ffective date: 1) cannot be prior to lent is filed by the Florida Departme fective date listed in the attached (	(OPTIONAL) nor more than 90 days after the date thi ent of State; <u>AND</u> 2) must be the same a	S
effective date: 1) cannot be prior to nent is filed by the Florida Department fective date listed in the attached (s listed therein.)  REQUIRED SIGNATURE:	nor more than 90 days after the date thi ent of State; <u>AND</u> 2) must be the same as Certificate of Conversion, if an effective	S
effective date: 1) cannot be prior to nent is filed by the Florida Department fective date listed in the attached (solution) and the second of	(OPTIONAL) nor more than 90 days after the date thi ent of State; <u>AND</u> 2) must be the same a	S
effective date: 1) cannot be prior to ment is filed by the Florida Department fective date listed in the attached (s listed therein.)  REQUIRED SIGNATURE:  Signature of a member or an au (In accordance with section 608, of this document constitutes an au	nor more than 90 days after the date thi ent of State; AND 2) must be the same as Certificate of Conversion, if an effective	S
effective date: 1) cannot be prior to ment is filed by the Florida Department fective date listed in the attached (s listed therein.)  REQUIRED SIGNATURE:  Signature of a member or an au (In accordance with section 608, of this document constitutes an au	nor more than 90 days after the date thi ent of State; AND 2) must be the same as Certificate of Conversion, if an effective authorized representative of a member.  408(3), Florida Statutes, the execution ffirmation under the penalties of perjury tated herein are true.)	S

#### **Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Page 2 of 2